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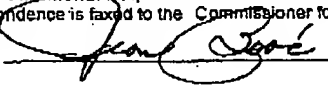
PTO/SB/22 (10-04)

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<b>PETITION FOR EXTENSION OF TIME UNDER 37.CFR 1.136(a)</b> <b>FY 2005</b> (fees effective on or after October 1, 2004)		Docket Number (Optional) 1279-277	
Application Number      09/831843		Filed      August 13, 2001	
For    ENHANCED WAVEFORM INTERPOLATIVE CODER			
Art Unit      2626		Examiner      Vijay B. Chawan	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120.00	\$60.00	\$ _____
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$460.00	\$230.00	\$ 460.00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1050.00	\$525.00	\$ _____
<input type="checkbox"/> First month paid 9/12/07			_____
<input type="checkbox"/>			_____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-3881</u> . I have enclosed a duplicate copy of this sheet.			
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input type="checkbox"/> attorney or agent of record. Registration Number _____ <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) <u>56,594</u>			
 _____ Signature		<u>June 6, 2008</u> _____ Date	
<u>Richard Y. M. Tun</u> _____ Typed or printed name		<u>(213) 533-4175</u> _____ Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of <u>1</u> forms are submitted.			

Two Month Request for Extension of Time Under 37 CFR 1.136(a) I hereby certify that this correspondence is faxed to the Commissioner for Patents, via (571) 283-8300 on the date shown below. 6/6/08	
Signature: 	(Jean Bove)

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